

MUNICIPAL OFFICE  
Mary Hanstad  
Clerk/Deputy Treasurer  
262/886-7201



2801 89<sup>th</sup> Street  
Sturtevant, WI 53177  
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## APPLICATION FOR STREET USE PERMIT

(Block Party- Application Due 30 Days Prior to Event)

Name of Applicant \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_  
Street City State ZIP

Responsible Person \_\_\_\_\_  
(if other than Applicant)

Address \_\_\_\_\_  
Street City State ZIP

Area Requested \_\_\_\_\_

(Main thoroughfares are not eligible for Street Use Permit. These streets include but are not limited to :  
Durand Avenue, Wisconsin Street, 90<sup>th</sup> Street and Broadway Drive)

Date \_\_\_\_\_ Starting Time \_\_\_\_\_ (Not Before 8 am)  
Ending Time \_\_\_\_\_ (Not After 10 pm)

Approximate number of persons for who proposed street area is being  
requested \_\_\_\_\_.

In detail, proposed use and location for which Street Use Permit is being  
requested:

### APPLICATION FEE: \$75.00

I, the undersigned (representing the sponsor group), have read the conditions of use and general rules of use and agree to comply with them and further agree to indemnify the Village of Sturtevant from liability incurred by the Village by virtue of granting the permit reservation as per application and release the Village from any damages, losses or additional costs incurred.

Include Petition for Street Use Permit when submitting application signed by not less than 75% of the residents over 18 years residing along that portion of the street designated for the proposed use.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Office Use Only

Date Filed: \_\_\_\_\_ Date Approved by Village Board: \_\_\_\_\_ License No. \_\_\_\_\_

## PETITION FOR STREET CLOSING

The following residents of \_\_\_\_\_ acknowledge the request for street closing from \_\_\_\_\_ to \_\_\_\_\_ for the day and time \_\_\_\_\_.

NAME

ADDRESS

Signature of Circulator

Address of Circulator